GEORGIA STATE BOARD OF PHYSICAL THERAPY BOARD POLICIES

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APPLICATIONS

Policy #1 - General Application Information

- 1.(a) Applications will be approved administratively once all criteria as outlined in the law and board rules have been met.
 - The staff will not administratively approve any applications with an affirmative answer to the conviction or board sanction question.

A "yes" response for failure of the examination may be administratively approved. All administratively issued licenses are considered for a vote to ratify at the next regularly scheduled board meeting. The average processing time for a complete application is approximately fifteen (15) working days.

- 1.(b) The board designates one board member to review any application with an affirmative answer to the conviction or board sanction question. Upon review of the application, the designee will approve/deny said application and present the decision to the full board for a vote to ratify the issuance.
- 1(c) The Board reviews all Reinstatement applications.

Policy approved at the March 16, 2004 meeting.

Policy #2 - Examination applications

- 2.(a) The Board reviews all foreign-educated examination applicants.
- 2.(b) An applicant that has not passed the national physical therapy examination by the fourth (4th) time will not be allowed to sit for the examination for a 5th time without extensive further study, which may include completing a physical therapy educational program approved by the Commission on Physical Therapy Education of the American Physical Therapy Association.
- 2(c) Applicants for initial licensure by exam may take the Ethics & Jurisprudence exam within 180 days of anticipated date of graduation.

Policy approved at the March 16, 2004 meeting.

Policy #3 - Endorsement applications

- 3.(a) Staff cannot approve non-CAPTE educated endorsement applicants.
- 3.(b) Endorsement applicants who have passed the examination within one (1) year of graduation may apply by examination instead of endorsement and must submit verification of licensure from every state in which they have held a license.
- 3(c) All endorsement applicants must take and pass the Georgia law exam. Candidates must register for the exam through the Federation of State Boards of Physical Therapy (FSBPT).

3 (d) An applicant who has taken the NPTE four or more times before receiving a passing score on the exam will be required to submit further evidence of competency or stipulations as determined by the Board.

Policy approved at the September 18, 2007 meeting.

Policy #4 - Renewal Applications

4.(a) A renewal applicant who answers "no" to the continuing competency question must provide proof of completion of the continuing competency requirement.

Policy approved at the March 16, 2004 meeting.

Policy #5 - Traineeship Supervision

- 5.(a) The Board reviews all Traineeship Supervision requests.
- 5.(b) Once Traineeship Supervision is approved, a letter will be sent to the physical therapist approved as the supervisor that all supervision must be in compliance with board rule 490-2-.04.

Policy approved at the March 16, 2004 meeting.

Policy #6 – Reinstatement

- 6.(a) All licensees who fail to renew their license by the established deadline are placed in "lapsed" status and must reinstate his/her license. Reinstatement applicants who state on the reinstatement application that they have practiced without a current license are considered for reinstatement under the following conditions:
- Public Consent Order with Public Reprimand
- \$10 fine for each day of unlicensed practice
- Must take & pass the law exam within 13 months of the docket date of the consent order.

Policy approved at the August 17, 2004 meeting.

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Policy approved at the August 17, 2004 meeting.

Policy #7 - Continuing Competence Policy

The Georgia State Board of Physical Therapy requires each licensed physical therapist and physical therapist assistant to participate in a minimum number of thirty (30) clock hours of experience to promote continuing competence per licensure period. The Board has defined the requirements for competence as planned learning experiences which have content beyond the licensee's present level of knowledge and competence which may be subject to audit by the board. Content of the experience must relate to patient care in physical therapy whether the subject is research, treatment, documentation, education, management, or some other content area. The purpose of this requirement is to assist in assuring safe and effective practices in the provision of physical therapy services to the citizens of Georgia. In the event that a licensee does not meet this requirement, the license will not be renewed. The following are programs which may be included for approval; however, this list is not limited to these suggested programs.

The following programs may be considered for Class I approval, but are not limited to:

- (a) Programs approved by the American Physical Therapy Association and its affiliate components; or
- (b) Programs approved by the Physical Therapy Association of Georgia or any other state chapters; or
- (c) Programs approved by the Federation of State Boards of Physical Therapy; or
- (d) Programs provided at CAPTE-Accredited colleges and universities with programs in

physical therapy when the continuing competency course is held under the auspices of the school of physical therapy; or

- (e) Programs provided by the American Academy of Physical Therapy; or
- (f) Programs approved by another state board; or
- (g) Programs provided at JCAHO-accredited healthcare organizations; or
- (h) Programs provided by the American Academy of Orthopedic Surgeons; or
- (i) Programs provided by the National Athletic Trainers Association; or
- (j) Programs provided by the American Dental Association; or
- (k) Programs provided by the American Association of Nurses; or
- (I) Programs provided by the American Occupational Therapy Association; or
- (m) Fifteen (15) hours for undergoing a peer review; or
- (n) Ten (10) hours for conducting a peer review when that activity is an adjunct responsibility and not the primary employment; or
- (o) Participation as a presenter for continuing education courses, workshops, seminars or symposia which have been approved by the approved list above; Continuing competence credit is based on contact hours and may not exceed 10 hours per topic;
- (p) Authorship of a presented scientific poster, scientific platform presentation or published article; Continuing competence credit is 10 hours per event and may not exceed 20 hours;
- (q) Teaching a physical therapist or physical therapist assistant credit course when that teaching is an adjunct responsibility and not the primary employment; Continuing competence credit is based on contact hours not to exceed 20 hours;
- (r) Certification of clinical specialization by the America Board of Physical Therapy Specialties. Continuing competence credit is 30 hours and is recognized only in the biennium in which certification or recertification is awarded.

The following programs may be considered for Class II approval (limited to10 hours):

- (a) Self- instruction from reading professional literature; Continuing competence credit is limited to a maximum of five (5) hours; or
- (b) Attendance at a scientific poster session, lecture, panel, symposium or university course that does not meet the criteria for Class I; Continuing competency credit is one hour per contact hour of activity; or
- (c) Acting as a clinical education instructor for an accredited physical therapist or physical therapist assistant educational program; Continuing competence credit is one (1) hour per eight (8) contact hours; or
- (d) Acting as a clinical instructor or an intern for a formal, nonacademic, advanced clinical internship or as a mentor or a learner for a formal, nonacademic mentorship.

Continuing competency hours obtained between October 31, 2007 and December 31, 2007, which were not used as continuing competency hours for the 2006-2007 biennium, may be used as continuing competency hours for the 2008-2009 biennium. The rolling over of these hours will not be allowed for future bienniums.

Policy approved at the October 31, 2007 meeting.

Policy #8 - COGNIZANT MATTERS/ INVESTIGATIONS/DISCIPLINARY MATTERS

- 8.(a) It is the policy of the GSB of PT to maintain strict confidentiality of investigations of alleged violations of the Board's Laws and Rules and the identity of the individuals involved. To this end the GSB of PT has adopted the use of a member of the Board to act as Cognizant. The Cognizant member shall have access to all records and documents relating to the complaint and investigations. The Cognizant member shall not disclose information leading to the identity of the member until such time as the GSB of PT votes to pursue formal disciplinary action. In addition to processing as a complaint for board review, all complaints received alleging irregular insurance billing practices will automatically be referred to the Insurance Commissioners Office for investigation.
- 8.(b) Cognizant Review: The board staff shall receive all complaints of alleged violations of the Board's laws and rules and present complaints to the cognizant member. The complainant will be notified in an appropriate timeframe that the complaint has been received by the board office and has been forwarded to the cognizant member for review and action.

The cognizant member shall have the following authority:

- 1. Recommend to full board that complaint be dismissed due to no alleged violation of the laws or rules.
- 2. Refer for investigation directly to the Enforcement Division.
- 3. After investigation is complete, make a recommendation to the full Board for one of the following:
 - a. Close No violation
 - b. Sanction if investigative findings are that a violation has occurred
- 4. Refer investigative files to Georgia Medicare Part B Centers for **Medicare & Medicaid Fraud** investigative offices involving inappropriate practice and/or billing.
- 8.(c) In all situations, the Cognizant member shall report to the Board the actions taken regarding the investigation of the complaint.
- 8.(d) The Cognizant member receive copies of Enforcement Referrals and/or Dispositions to investigations on each of their cases.
- 8.(e) All requests for additional information, from staff or cognizant member should be in writing.
- 8.(f) Probation reports shall be provided by the staff at each Board meeting.

8.(g) If a matter has been referred to the AG's office for a consent order, the order will include the requirement that the disciplined licensee must take and receive a passing score on the jurisprudence examination within 3 months of the docket date of the order.

Policy approved at the March 16, 2004 meeting.

Policy #9 – PEER REVIEW

9(a) Individuals working as peer reviewers for the board must have no disciplinary history, current clinical expertise of five (5) years experience and be capable of providing an expert opinion on the subject matter and to general questions of patient care, record keeping and billing. Peer reviewers be selected by the Board on a case-by-case basis.

Policy approved at the March 16, 2004 meeting.

Policy #10 - Mental Physical Evaluations

10.(a) The Board will accept the guidelines for mental physical evaluations as provided by O.C.G.A § 43-33-18(a)(2).

Policy approved at the March 16, 2004 meeting.

Policy #11 - MEETINGS/RECORDS

Policy Review

11.(a) The Board voted to hold an **annual policy review** of the full Board effective March 2004. All Policies must be reviewed annually. Policy approved at the March 16, 2004 meeting.

<u>Minutes</u>

- 11.(b) The Board voted to request staff to submit a draft of **minutes** at least one (1) week prior to the Board meeting or conference call.
- 11.(c) Arrival and departure times of Board members will be noted in the minutes. Policy approved at the March 16, 2004 meeting.

<u>Meetings</u>

11.(d) Meetings will be held as established by yearly calendar that is approved by the board. Changes to the meeting dates and times may be called when necessary.

Policy approved at the March 16, 2004 meeting.

Policy #12 - POSITION ON MEDICATIONS

12.(a) The Georgia State Board of Physical Therapy, adopts the APTA position of Medications in the Provision of Physical Therapy which states:
The scope of practice of physical therapy often requires the use of medications in the course of patient/client management, such as in the administration of phonopheresis, iontophoresis, nebulized bronchodilators, and in integumentary repair and protection. The application and storage of medications used in physical therapy is within the scope of physical therapy practice.

Policy approved at the May 18, 2004 meeting.

Policy #13 – Biannual Review of Ethics & Jursiprudence Exam

The Board established a policy that a biannual review of the Ethics and Jurisprudence exam will occur in February and in September of each year. Two Board members will be appointed by the Board to review the exam each year.

Policy approved at the May 8, 2007 meeting.